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# Governor's Interagency Transportation Coordinating Committee's 2011 Annual Report

Maine Department of Transportation

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**Annual Report of the  
Governor's Interagency Transportation Coordinating Committee**

**Submitted to Governor Paul R. LePage  
and the  
Joint Standing Committee on Transportation**

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**April 12, 2011**

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## **COMMITTEE BACKGROUND**

The Governor's Interagency Transportation Coordinating Committee ("ITCC") was established pursuant to Public Law 2009, Chapter 130 entitled "An Act to Implement the Recommendations of the Governor's Interagency Transportation Coordinating Committee." This piece of legislation formalized into law the collaborative efforts of three state agencies in the delivery of passenger transportation services in Maine. Specifically, the law mandates that the commissioners (or their designees) of Transportation, Health and Human Services and Labor serve on the committee to promote efficiency, cooperation and strategic planning for public transportation purposes.

State agency coordination of transportation services dates back to 1993, when the former Maine Departments of Human Services and Mental Health and Mental Retardation worked with the Department of Transportation to designate regional geographic boundaries in an effort to provide "efficient and cost effective transportation services to children, elderly persons, persons with disabilities and the general public" and equity among the various transportation providers.

The interagency efforts were further strengthened when Governor Baldacci issued an Executive Order on December 20, 2004, establishing an interagency coordinating committee in response to a February 2004 Executive Order of President George W. Bush of the United States establishing such a committee at a federal level. The committee would also assist the state in carrying out activities in response to a United States Supreme Court decision *Olmstead v. L.C.* in 1999, which directed the federal government to assist states in developing a plan to provide services to individuals with disabilities in a least restrictive setting. Commissioners from the Maine Departments of Transportation (MaineDOT), Health and Human Services and Labor named representatives to serve on the Interagency Transportation Coordinating Committee and their work began in the spring of 2005.

Members of the Interagency Transportation Coordinating Committee subsequently developed a strategic plan for the purpose of identifying the state's goals at improving methods of the delivery of passenger transportation, increasing effectiveness and efficiency and improving universal mobility for Maine citizens and visitors. The plan outlines the following six goals: 1. Increase efforts at education and outreach; 2. Consolidate access; 3. Reduce regulatory barriers; 4. Coordinate planning; 5. Standardize cost allocation; and 6. Document successful models of services.

The MaineDOT's Statewide Biennial Operations Plan (BOP) is an additional tool used by the committee to review current fixed-route and demand-response mass transportation services and to identify opportunities for enhancing these services. Development of the BOP offers the service providers and transit users an opportunity for structured dialogue concerning the opportunities and obstacles to providing efficient and productive mobility for travelers in Maine. The BOP also serves as the basis for federal and state funding of public transportation projects in both rural and urban areas of Maine.

## **COMMITTEE ACCOMPLISHMENTS TO DATE**

The ITCC strategic plan provides the framework by which the committee measures its progress in meeting its mission to promote efficiency, cooperative effort and strategic planning for public transportation. Below are highlights of the committee's accomplishments to date:

### **Strategic Plan Review**

The ITCC is in the process of revising its strategic plan in an effort to refocus priorities given the current funding challenges such as diminishing capital and operational resources. The work includes a review of the education and outreach efforts, consolidated access goals, regulatory issues and/or barriers, coordinated planning processes and best practices.

The strategic plans of the ITCC will be part of a major planning study by MaineDOT entitled, "Statewide Transit Strategic Plan" which will be a comprehensive analysis of transit services in Maine. Specifically, the study will provide recommendations in prioritizing service improvements, identifying performance measures and responding to the evaluation of expanded transit services. The plan will be a holistic approach to evaluating surface passenger transportation initiatives, programs and funding sources including interagency coordination of public and social service transportation, biennial operations plans of the eight transit districts, Explore Maine, Go Maine, Park & Ride Lot Program, connectivity with passenger and commuter rail, ferry service, and capital improvements for transit providers. The plan will have a particular focus on Maine's aging population and will assess and make recommendations to meet the elderly transportation needs statewide. In addition, the plan will make recommendations for policymakers to consider based on an analysis of best practices for transit planning and funding strategies.

### **MaineCare Transportation Funding**

MaineCare Services has spent the last year examining non-emergency transportation options for the purpose of complying with the Centers for Medicaid & Medicare Services (CMS) regulations. The ITCC will be involved as MaineCare now moves toward a statewide risk-based Prepaid Ambulatory Health Plan (PAHP) non-emergency transportation brokerage model and amends the 1915b waiver. These changes will directly impact transportation users, providers and state agencies mandated with providing transportation services.

### **Biennial Operations Plan (BOP) Report**

The MaineDOT is in the process of scheduling Regional Plan Advisory Committee (RPAC) meetings this spring to host a series of discussions regarding transit services. A summary of the discussions will be submitted to the ITCC for consideration and then published in the BOP later this year. In addition, updates to the recommendations that were collected during the last BOP will be provided to the RPACs in advance to ensure that a more thorough and comprehensive dialogue is held at the meetings. Specifically, notices to participate at the meetings are sent to key state agencies, municipal officials, advocacy groups and the general public. This process has proven successful in identifying comprehensive transportation issues which are then shared with the ITCC and further developed into the ITCC's strategic plan.

## **Biennial Operations Plan (BOP) Report (cont.)**

The ITCC will continue to review the recommendations from the ad-hoc committee regarding the collection and analysis of data to ensure that transportation resources are allocated appropriately and efficiently. This will require an inventory of state agency transportation programs and a review of the reporting requirements associated with each program area. The purpose of reviewing the reporting requirements is to ensure that proper data collection is obtained in order to identify areas of inefficiencies, unmet need and opportunities for cost-savings. Currently, an initiative to collaborate with the Maine Transit Association, which is a professional transit organization, has been identified for the purpose of partnering on various transit policy issues such as data collection.

### **Customer Service**

MaineDOT and the Muskie School of Public Service – Center for Learning are working on establishing an online training program to offer customer service training to provider staff in a more accessible and efficient manner. The online training should be available later this year.

## **INVENTORY OF CURRENT SERVICES**

There are various federal, state and local programs that provide services to the transportation disadvantaged as well as the general public. A brief description of transportation services provided by each of the member agencies of the Interagency Transportation Coordinating Committee is provided below.

### **Maine Department of Transportation Bureau of Transportation Systems Planning (BTSP)**

The Bureau of Transportation Systems Planning's mission is to facilitate development of innovative customer-oriented policies, plans and programs in support of MaineDOT's mission of responsibly providing a safe, efficient, and reliable transportation system that supports economic opportunity and quality of life.

BTSP is responsible for managing and distributing financial support provided by the Federal Transit Administration (FTA) to 21 rural and small urban transportation systems. The current annual program funding figures from the FTA are \$5.4 million in non-urbanized areas and \$3.8 million in urban areas, and the current funding figure from the state budget is \$0.5 million. Additional funds are occasionally available from discretionary and competitive FTA programs, as well as state bond match for vehicle purchase.

As indicated earlier, there are 21 transit systems statewide that are divided into eight geographical regions that receive federal and state funding through BTSP. The three categories of transportation systems are regional transportation systems, fixed-route transit systems and transit systems supporting the tourist industry. Regional transportation systems receive funding that serve rural areas and generally provide services to low-income, elderly, and disabled

## **Bureau of Transportation Systems Planning (BTSP) (cont.)**

populations, as well as the Maine Department of Health and Human Services' clients. Fixed-route transit systems receive partial funding and use a fare system to cover operational costs and provide urban, rural, intercity and ferry services. Currently, three transportation providers also provide seasonal services. (*Source – Executive Summary, Biennial Operations Plan FY09 and FY10*)

### **Maine Department of Health and Human Services**

#### **MaineCare Services**

Public transportation plays an important role in the daily lives of many Maine citizens. Without a doubt, one of the most vital needs for Maine's most vulnerable citizens is access to health care services. Getting to these services is the first step.

The Maine Department of Health and Human Services and MaineDOT cooperate to help provide non-emergency transportation for MaineCare members to access medically necessary Medicaid covered services. Full Service Regional Transportation Providers arrange the most efficient form of suitable transportation for the member only when transportation is not otherwise available. At present, MaineCare is the major funding source for the nine regional public transit systems within Maine.

MaineCare reimburses a variety of modes of suitable non-emergency medical transportation, including:

- Transportation by members, friends, family, and volunteers;
- Transportation using Maine Department of Transportation leased vehicles and other vehicles with hired employees;
- Taxis; and
- Maine's 13 year-round fixed-route transit systems, which use a fare system, operate on a fixed schedule, and include urban bus systems, intercity services and ferry systems.

MaineCare Services' non-emergency medical transportation (NEMT) system is currently undergoing transition. Details follow beginning on page 10 below.

### **Maine Department of Health and Human Services**

#### **Office of Integrated Access and Support (OIAS)**

The Additional Support for People in Retraining and Employment Program within OIAS is charged with providing additional support to Maine families who receive Temporary Assistance for Needy Families (TANF). The goal is to provide assistance that enables families to reach the goal of self-support. Transportation needs are met in a variety of ways through the ASPIRE program.

### **Office of Integrated Access and Support (OIAS) (cont.)**

Participants select the specific transportation support that meets their needs. Options include assistance with the following expenses: auto maintenance and vehicle repair; liability insurance; reimbursement for individual vehicle transportation; public transportation; and temporary private transportation. Assistance may be direct payments for a service, or more often, as reimbursement to the participant or the individual transporting them. In the State Fiscal Year 2010, the cost for this support was \$5.3 million.

Transportation assistance is also provided to ASPIRE participants through a contracted service with Goodwill Industries of Northern New England, Good Wheels to Work. Eligible employed participants may qualify for a low-interest rate car loan through this program.

Good Wheels staff also assists in determining the quality and safety level of participants' vehicles upon request and may assist in determining appropriate car repair expenses.

Transportation support for ASPIRE participants is funded with a combination of Federal TANF block grant dollars and State dollars.

### **Maine Department of Health and Human Services Office of Child and Family Services (OCFS)**

The target population served is all clients in the care or custody of the Maine Department of Health and Human Services without regard to income as well as low-income clients who are not eligible for Maine Care. Transportation services are needed to prevent at-risk, disadvantaged individuals from further alienation from the mainstream, inappropriate institutionalization, continued abuse and neglect and continued dependence on the social welfare system.

One funding source for this contract is the Federal Social Services Block Grant (SSBG). In compliance with the funding objectives of SSBG, transportation services are directed toward one of the following five goals specified by law: (1) to prevent, reduce, or eliminate dependency; (2) to achieve or maintain self-sufficiency; (3) to prevent neglect, abuse, or exploitation of children and adults; (4) to prevent or reduce inappropriate institutional care; and (5) to secure admission or referral for institutional care when other forms of care are not appropriate.

Eligible individuals can use these funds to access transportation to social and medical services when no other reasonable means exists. Target populations are: child protective cases, children in the care or custody of the Maine Department of Health and Human Services and low income individuals/families who are not eligible for Maine Care services.

**Maine Department of Health and Human Services**  
**Office of Elder Services (OES)**

As part of federal Administration on Aging (AoA) funding, OES has Title III funding available to the Area Agencies on Aging (AAAs) that they can allocate to transportation needs. It is an option, but not a required component. For the most part, the agencies have not utilized these funds for transportation because they have determined higher priorities.

Most of the agencies utilize regional transportation providers such as Aroostook Regional Transport, The Lynx, and WHCA to meet the transportation needs of their clients.

The Office of Elder Services does not have funding specifically dedicated to transportation services. However, the state-funded respite program within OES might allow a caregiver or someone else to be reimbursed for transportation costs of taking someone back and forth to an adult day program if it stays within the capped amount. Most of the agencies reimburse their volunteers a mileage cost if associated with the provision of services – such as our Meals on Wheels drivers.

Below are highlighted examples of how agencies fund and deliver transportation services to the elderly:

1. Spectrum Generations in Augusta has an annual grant given to Coastal Trans, Inc. The grant is for transporting non-Maine Care consumers and their caregivers to get to medical, dental and psychiatric services.
2. Some agencies have helped coordinate local volunteers who are willing to provide transportation to individuals with medical needs. There is no funding however.
3. Eastern Area Agency on Aging utilize two programs:
  - **Elizabeth West Transportation** – provides medical rides to people who live in Bangor or any town contiguous to Bangor. Rides are provided either by EW's van or through a taxi company. Co-pays are based on income.
  - **Med Rides** - provides reimbursement to medical appointments for anyone in Penobscot, Piscataquis, Washington or Hancock Counties. Rides must be provided by a volunteer,( i.e. family, friend or neighbor, etc) The rides are reimbursed at 22 cents per mile.
4. The Adult Protective Services Caseworkers have some very limited flexibility to designate funds for transportation needs based upon extraordinary circumstances and determined on a case-by-case basis. It must also fall within pre-established limits.

## **Maine Department of Labor**

### Bureau of Rehabilitation Services - Division of Vocational Rehabilitation (DVR)

The Maine Division of Vocational Rehabilitation program assists eligible individuals (clients) with physical or mental disabilities to prepare for and achieve an employment outcome. To be found eligible, the disability or disabilities must result in a substantial barrier to employment and the individual must be able to benefit from DVR services needed to achieve the employment outcome. "Employment outcome" means entering or retaining full time employment or, if appropriate, part-time competitive employment in the integrated labor market, supported employment, or any other type of employment in an integrated setting. This can also include self-employment, telecommuting, or business ownership that is consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice. "Integrated", with respect to an employment outcome, means a setting typically found in the community in which people with disabilities interact with non-disabled individuals.

Services are provided under an Individualized Plan for Employment that is oriented to the achievement of a vocational goal. Services provided to individuals with disabilities must be necessary to overcome the vocational barrier, must be provided as cost effectively as possible, and will be of sufficient quality to meet individual needs. All funding must be pre-authorized.

Core DVR services include such elements as vocational guidance and counseling, job training and education, job placement, and job coaching. Support services such as *transportation* are funded only when necessary for the client to derive benefit from core DVR services.

#### **Transportation Expenses:**

- Public transportation must be the transportation of choice if it is readily available in the area and matches the individual's needed schedule. An individual may choose to use his or her own vehicle in this situation but will only be funded for gas up to the cost of a monthly bus pass for the fare. Those who are not able to use public transportation because of their disability must provide specific documentation as to why from the treating physician or psychiatrist.
- Reimbursement will be for actual expenses needed to participate in the Plan. This may include gas (based on actual mileage and miles per gallon), tolls, and parking.
- Alternative sources of funding must be explored before DVR funding is provided.
- DVR is not responsible for routine vehicle maintenance expenses.
- Funding for vehicle repairs singly or in combination over the life of the DVR case cannot exceed the value of the vehicle and must be performed by a certified mechanic who can attest to the cost/benefit of repairing the vehicle.
- Assistance with vehicle purchase will only take place if it is the most cost effective option for transportation and all other resources have been explored and utilized. Prior to authorizing such assistance there must be a determination of the individual's ability to afford a vehicle not only in terms of payments but also vehicle maintenance and insurance. Generally, a down payment of \$500 is provided. Any payment beyond that up to \$1000 must be approved by a supervisor.

## **Bureau of Rehabilitation Services - Division of Vocational Rehabilitation (DVR) (cont.)**

- Start-up costs related to a vehicle purchase, which may also be considered for DVR funding include initial payment of registration, excise tax, and initial insurance down payment to bind coverage.

The expenditure by service code report for FFY 2007 through 2010 includes: Transportation, Transportation Expenses Reimbursed, Vehicle Modifications, and Vehicle Repairs as follows:

2007 - \$1,063,441  
2008 - \$577,822  
2009 - \$611,748  
2010 - \$437,707

This reflects the continued cost savings resulting from changes made in 2008 to DVR transportation policy as outlined in the bulleted list above.

## **MaineDOT FLEET CAPACITY**

The Maine Department of Transportation's Transit Operations Section is responsible for managing a fleet of 433 vehicles, which are leased to transportation providers statewide in accordance with federal and state regulations. The capital investment made to date in the procurement of accessible vehicles is approximately \$57,236,000.

MaineDOT vehicles support 21 transit systems and those systems fall into one of three categories such as a regional transportation system, a fixed-route transit system or a seasonal/tourism system and provide extensive interagency coordination between public transit and human service transportation programs.

Fifty-one percent of MaineDOT's passenger vehicle fleet has more than 50% of its useful life remaining. Forty-nine percent are within 50% of the end of their useful life. Of the older vehicles, 25% are completely beyond their useful life and 11% are close to that condition.

### **MaineDOT Fleet Capacity/Inventory**

#### **Vehicles by Category**

Small Cutaways and Vans	193
Mid Size Buses	167
Large Buses	73
<b>Total Fleet</b>	<b>433</b>

#### **Seating Capacity**

Ambulatory	7139
Wheelchair positions	680

## **MaineDOT FLEET CAPACITY (cont.)**

Percent of Accessible Vehicles	80%*
Percent of Vehicles by Useful Life	
Over 100% useful life	25%
Between 75%-100% useful life	11%

MaineDOT anticipates a combination of small vans, mid and large-size buses to be delivered in 2011. The total number of new fleet anticipated to arrive in 2011 is 68 vehicles.

\*Note: the 20% is comprised of commuter vans and demand-response vans that cannot fully accommodate people with disabilities. However, the services do meet the accessibility guidelines in that alternative means of transportation are coordinated and referred to a service that can accommodate to ensure that a ride is available.

## **ISSUES ANTICIPATED FOR 2011**

### **Strategic Plan Review**

The ITCC will review the current strategic plan and make necessary adjustments to its work plan in an effort to refocus its priorities given the funding challenges and limited resources. This work will include re-examining education and outreach efforts, consolidated access goals, regulatory issues and/or barriers, coordinated planning processes and best practices. In addition, a revised Memorandum of Agreement among the Departments of Health and Human Services, Labor and Transportation will be signed.

### **MaineCare Transportation Funding**

MaineCare Services' non-emergency medical transportation services (NEMT) is a mandatory service that is funded partly by the State and partly by the Federal government. The Centers for Medicare and Medicaid Services (CMS) has informed Maine's Department of Health and Human Services (DHHS) that it cannot continue its current reimbursement methodology for Non-Emergency Transportation (NEMT), which currently allows Full Service Regional Transportation Providers (FSRTPs) to be both the brokers and transportation providers.

CMS asserts that this arrangement is a conflict of interest, as providers can self refer. CMS has also raised concern with reimbursement methodology for other transportation means, including pass-through payments for bus, taxi, and ferry service and reimbursement for volunteer drivers, friends and family, and members. CMS also asserts that MaineCare may no longer seek Federal Medical Assistance Percentages (FMAP) match rate for many of the brokerage functions currently done by FSRTPs that CMS considers administrative in nature; these functions should only be matched at a 50% administrative rate.

## **ISSUES ANTICIPATED FOR 2011 (cont.)**

MaineCare Services has been working closely with the CMS over the past year to determine the best model that conforms to federal requirements, ensures timely access to transportation services, is cost-effective and sustainable with minimal disruption to the current service delivery system. After much discussion with its federal partners, it became clear to DHHS that to achieve these goals, a Risk-Based Prepaid Ambulatory Health Plan (PAHP) was the best option.

This approach means that MaineCare will be making capitated payments to a brokerage agency that will function like a managed care organization for NEMT. CMS will allow full FMAP matching for this approach, which allows MaineCare to continue in the most cost neutral manner moving forward. This approach also allows the broker to be flexible in utilizing all modes of transportation available to assure timely and 24/7 access to medically necessary services for our members, which is a key component of federal compliance. This model will also allow the continued involvement of volunteer, family and friend drivers, which is very important to MaineCare members. This model will ultimately be the most efficient and will allow MaineCare to continue the important NEMT services its members need for years to come.

This approach will require issuance of a competitive bid. MaineCare is working with CMS and DHHS on a timeline that will achieve federal compliance and effective implementation of a successful system in the timeliest manner possible.

### **Performance Measures**

The ITCC will work with its transportation partners, such as the Maine Transit Association and others, to further identify and recommend ways in which agencies and transportation providers collect and analyze data to ensure efficiencies. There will be a particular focus to develop measures that accurately reflect the unique characteristics of each transit district in terms of level of transit services, population density, socioeconomic factors, etc. so that performance is based on qualitative measures. In other words, a “one-size-fits-all” criteria for measuring performance of transit services in our regions is neither effective nor valid. Performance measures should be established and tailored for each of the eight transit regions.

### **Customer Service**

The Maine Department of Transportation and the Muskie School of Public Service – Center for Learning continue to work on establishing an online training program to offer customer service training to provider staff in a more accessible and efficient manner.

## **CONCLUSION**

The focus of the committee’s work during this past year has been reviewing the Biennial Operations Plan, discussing strategies regarding data collection and identifying performance measures for agency contracting purposes, improving coordination of children transportation services, managing staffing transitions and monitoring the MaineCare/CMS brokerage rule issue.

## **CONCLUSION (cont.)**

These transportation policy issues will continue to be revisited in the coming year and the committee is looking forward to continued cooperation and collaboration with the various transportation stakeholders.

Specifically, the ITCC will revise its 5-Year Strategic Plan, which will continue to focus on strategies such as improving the delivery of services, examining regulatory issues, increasing community involvement in the transportation planning process, evaluating transportation services and programs for efficiencies and increase access to information regarding transportation services.

The committee's work ahead will no doubt be challenging given the federal and state fiscal climates. Nonetheless, the ITCC is committed to ensuring that ongoing coordination and collaboration among state agencies can be achieved so that Maine's citizens and visitors benefit from its transportation services.

**APPENDIX A – 23 MRSA §4209 as amended by Public Law 2009, Chapter 130:**

**Title 23: HIGHWAYS**  
**Part 5: DEPARTMENT OF TRANSPORTATION**  
**Chapter 410: DEPARTMENT OF TRANSPORTATION**

**§4209 Public transportation administration**

**1. Geographic regions.** The Department of Transportation shall divide the State into a number of geographic regions for regional distribution of state-administered transportation funds. Upon designation of the geographic regions, a regional public transportation agency must be selected from each region to formulate a biennial regional operations plan. Selection of regional public transportation agencies must be by the Department of Transportation in collaboration with the committee established in subsection 1-A. The Department of Transportation shall establish a schedule for submittal of the biennial regional operations plan and shall reference these plans in its biennial transportation improvement plan submitted to the Legislature.

[ 2009, c. 130, §1 (AMD) .]

**1-A. Interagency Transportation Coordinating Committee.** The Interagency Transportation Coordinating Committee, referred to in this section as "the committee," is established to promote efficiency, cooperative effort and strategic planning for public transportation between the Department of Transportation, the Department of Labor and the Department of Health and Human Services.

- A. The committee consists of the Commissioner of Transportation, the Commissioner of Labor and the Commissioner of Health and Human Services or the designees of the commissioners. [2009, c. 130, §2 (NEW).]
- B. The committee shall meet at least twice each year. [2009, c. 130, §2 (NEW).]
- C. The Commissioner of Transportation shall designate the chair of the committee. [2009, c. 130, §2 (NEW).]
- D. The committee shall designate a catchment area for MaineCare transportation providers. [2009, c. 130, §2 (NEW).]
- E. The committee shall submit a report on its deliberations and any recommendations by February 15th each year to the Governor and the joint standing committee of the Legislature having jurisdiction over public transportation matters. [2009, c. 130, §2 (NEW).]

[ 2009, c. 130, §2 (NEW) .]

**2. Biennial regional operations plan.** The biennial regional operations plan submitted by each regional public transportation agency must provide for the following:

- A. Maximum feasible coordination of funds among all state agencies that sponsor transportation in the region; [1987, c. 428, §1 (AMD).]
- B. Development and maintenance of a permanent and effective public transportation system, with particular regard to riders who are low-income or elderly or who have disabilities; [2009, c. 130, §3 (AMD).]
- C. Participation of private transit operators in the service, to the greatest extent possible; [2009, c. 130, §3 (AMD).]

D. Conformity with general operations requirements as may be prescribed by the commissioner; and [2009, c. 130, §3 (AMD).]

E. Compliance with any appropriate federal regulations, including but not limited to the federally required locally coordinated plan. [2009, c. 130, §3 (NEW).]

In years in which no biennial plan is required, amendments to the effective operations may be submitted. Approval of each regional operations plan must be by the Department of Transportation in collaboration with the committee. Upon approval, all agencies, groups or organizations named to participate in the provision of service in accordance with a regional operations plan are eligible to receive funds administered by the Department of Transportation and the Department of Health and Human Services.

[ 2009, c. 130, §3 (AMD) .]

**3. State assistance.** Within the limits of available funding, the department shall provide assistance as follows:

A. Planning and technical assistance, information transfer, capital and operations planning, performance monitoring and evaluation, quality assurance, accounting, assistance with management information systems and service reporting to a regional operations plan drafter or transportation provider and securing of provider compliance with the requirements of other state agencies in these areas; [1987, c. 428, §2 (AMD).]

A-1. Act as mediator and, if necessary, final arbiter of disputes between state agencies and transportation providers regarding service; [1987, c. 428, §2 (NEW).]

A-2. In consultation with the Bureau of Insurance, advise transportation providers regarding the liability of volunteer drivers; [1991, c. 859, §1 (NEW).]

B. Capital assistance to transportation providers for up to 100% of the nonfederal share required by federal assistance programs; [1991, c. 103, (AMD).]

C. Operating assistance to transportation providers in an amount up to 1/2 of the operating deficit incurred in fulfillment of the biennial regional operations plan; and [1987, c. 428, §2 (AMD).]

D. Notwithstanding any other provision of law and except as funds are necessary to carry out the object of this section, funds appropriated for public transportation shall not lapse at the end of a fiscal year, but shall be carried forward from year to year to be expended for the same purpose. [1985, c. 174, Pt. E, (NEW).]

[ 1991, c. 859, §1 (AMD) .]

**4. Human services assistance; priorities.** The committee shall act to coordinate purchase of service contracts and serve in an advisory capacity to the department in matters concerning public transportation. In the event that transportation funds for human services programs are insufficient for full implementation of the human services portion of an approved biennial regional operations plan, priorities established by the Department of Health and Human Services determine the priority clients that must be initially served by human services funds. Members of the committee and their contractors shall actively engage local transportation providers in the planning of new services that are expected to have a transportation component.

The Department of Health and Human Services and the Department of Labor shall ensure that any new service to be provided is adequately funded to cover the costs of the transportation component of the program.

[ 2009, c. 130, §4 (AMD) .]

**5. Intercity service.** Intercity service shall be service designated as such in a public transportation plan developed by the department. Intercity service planning shall fulfill the requirements set forth in subsection 2 and shall address public transportation needs that cannot be met by regional operations planning. The State may contribute to the nonfederal costs of intercity service.

[ 1979, c. 505, §4 (NEW) . ]

**6. Letters of credit; reporting requirements; general powers.** To further the purposes of this section, the Department of Transportation may do the following:

- A. Make available letters of credit or other appropriate assistance to transportation providers faced with unavoidable difficulties in securing day-to-day operating expenses; [1979, c. 505, §4 (NEW).]
- B. Investigate all practicable ways that reporting requirements might be unified to reduce the paper workload for state and regional public transportation administration; and [1979, c. 505, §4 (NEW).]
- C. Exercise all powers necessary, convenient or incidental to assuring the development and maintenance of effective public transportation service throughout the State. [1979, c. 505, §4 (NEW).]

[ 1979, c. 505, §4 (NEW) . ]

**7. Review.**

[ 1987, c. 428, §4 (RP) . ]

**SECTION HISTORY**

1979, c. 505, §4 (NEW). 1981, c. 493, §2 (AMD). 1981, c. 559, (AMD). 1983, c. 812, §144 (AMD). 1985, c. 174, §E (AMD). 1987, c. 428, §§1-4 (AMD). 1991, c. 103, (AMD). 1991, c. 859, §1 (AMD). 1995, c. 560, §K82 (AMD). 1995, c. 560, §K83 (AFF). RR 1995, c. 2, §§47,48 (COR). 2001, c. 354, §3 (AMD). RR 2003, c. 2, §§83,84 (COR). 2009, c. 130, §§1-4 (AMD).

## **APPENDIX B – ITCC Strategic Plan**

### **Goal I – Education and Outreach**

To develop an education plan for coordinated human service transportation resulting in enhanced customer access at the local level for individuals with disabilities, older adults and individuals with lower incomes.

#### **Deliverables**

1. A standardized rider education packet will be developed for distribution;
2. A standardized training curriculum will be developed for transportation providers to ensure accurate, complete and consistent information is communicated to the rider;
3. An operator's manual will be developed ensuring all accepted practices are understood and followed; and
4. A one-stop shop call center will be implemented ensuring up to date accurate travel information is available to potential riders.

### **Goal II – Consolidated Access**

To develop a comprehensive and coordinated transportation system by simplifying access to transportation services and enhancing customer service.

#### **Deliverables**

1. Provider goals will be established enhancing service to riders;
2. A method allowing for all regional groups including riders, providers and funding agencies to meet on an annual basis will be developed;
3. One State agency will assume responsibility for managing all transportation;
4. Enhanced scheduling software will be used by providers whenever feasible;
5. Standardized reporting of trip cost and data will be developed; and
6. Volunteer driver rate of reimbursement will be tied to State employee's mileage reimbursement rate.

### **Goal III – Regulatory Barriers**

To reduce restrictive and duplicative laws, regulations and programs related to human service transportation at the federal and/or state level.

#### **Deliverables**

1. Requirements for issuance of buss passes will be simplified;
2. One state agency will assume responsibility for managing all transportation;
3. All vehicles funded with state or federal dollars will be open to referrals from the Regional Transportation Provider;
4. Mixing of riders in volunteer vehicles will be clarified by policy;
5. A new source of revenue to support transportation will be found;
6. All trip requests will be made through a Regional Provider; and
7. Volunteer mileage rate, at a minimum, will be tied to state employee's mileage reimbursement rate.

### **Goal IV – Coordinated Planning**

To ensure comprehensive planning for the coordination of human service transportation for individuals with disabilities, older adults and persons with lower incomes.

#### **Deliverables**

1. Goals will be established for improved provider service;
2. A method allowing for all regional groups, provider, agencies, riders to meet on an annual basis will be developed;
3. One state agency will assume responsibility for managing transportation;
4. The Biennial Operations Plan process will be improved upon, including more involvement from riders, funding agencies and all providers within a region;
5. Enhanced scheduling software will be used whenever feasible; and
6. On-going regional reviews will be conducted by the Governor's Interagency Transportation Coordinating Committee.

## **Goal V – Cost Allocation**

To standardize cost allocation processes.

### **Deliverables**

1. A method of standardized cost allocation will be developed;
2. Enhanced scheduling software will be used wherever feasible; and
3. Standardized reporting of cost/trip data will be developed.

## **Goal VI – Useful Practices**

To document successful strategies in coordinating human service transportation at the federal, state, tribal and local levels.

### **Deliverables**

1. The Biennial Operations Plan process will include reviews of coordination efforts and demonstrated useful practices (both implemented and planned); and
2. The Governor's Interagency Transportation Coordinating Committee (or sub-committee) will conduct regional review ensuring coordination and useful practices are documented.

## **APPENDIX C – ITCC Committee Membership**

### **Maine Department of Transportation – Bureau of Transportation Systems Planning**

**Cindy Farrin**, Transportation Planning Analyst

**Sue Moreau**, Manager, Multimodal Planning & Operations

**Penny Vaillancourt**, Policy Development Specialist

### **Maine Department of Health and Human Services**

**Vacant**, Manager, Community Programs, Office of Elder Services

**Delta Cseak**, Comprehensive Health Planner, Office of MaineCare

**Liz Ray**, ASPIRE Program Manager, Office of Integrated Access and Support

**Melissa Read**, Social Service Program Specialist I, Office of Child and Family Services

### **Maine Department of Labor**

**Cathy Singleton**, Casework Supervisor, Bureau of Rehabilitation Services